FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

(1)704240

NORTH PALM BEACH PRESBYTERIAN CHURCH, INC.

Principal Place of Business Mailing Address											II DBI(I AIDIR XXIII DIBII			II VIEII	AHOLI HOGI
BOX 14248 717 PROSPERI N PALM BEAC			BOX 14248 717 PROSPERITY FARMS ROAD N PALM BEACH FL 33408-4115								···				
										3. Date Incorpo	rated or Qualified 1962	3a. [ate of Last 02/14/	t Rept 1 996	ort }
2. Principal F	Pace of Busin	2	2a. Mailing Address						4. FEI Number				Appli	ied For	
21		26	26						59-15°	16451			Not A	Applicable	
Suite, Apt.	. #, etc.	<u> </u>	Suite, Apt #, etc.						5. Certificate of	Status Desired		\$8.7			
City & Stat	la	27	City & State										Requ		
23	16	100	├ ¬ ′						6. Election Can Trust Fund C	npaign Financing		\$5.0	JO Ma ad to F		
Zip Country				Zip Country							tion has liability for				
24	- ·			29 30				•		Florida Statu			No	1 B. 13	55.032,
9. Name and Address of Current Registered Agent										10. Name and Address of New Registered Agent					
							8	1	Name						
ELLIOT	r, edward					8	2	Street Addre	ess (P.O. Box Numl	per is Not Accepta	ble)				
	EACONHILL					-	_ _			•					
PALM B	BEACH GAR	DENS FL 334	10				8	3							
							8	4	City	· · · · · · · · · · · · · · · · · · ·		FI	85 Z	ip Co	de
11. Pursuant	to the provis	ions of Sections	617.0502 and	617.15	08. Florida Statul	tes. t	the abo	ve-	named corp	oration submits this	statement for the	purpose (<u>► </u>	a its r	egistered
office or i	registered ag	gent, or both, in ith and accept:	the State of Flo	orida. Su of Sec	ich change was tion 617 0503. Fi	auth	orized	by t	the corporati	ion's board of direc	tors. I hereby acce	pt the ap	pointment	as reg	gistered
SIGNATURE		in a discopt	, no obligations	0., 000		0,,00	- 0.4.6.								
SIGNATURE	Signature lypec	for printed name of re	gistered agent and	tite if appli	cable (NO)	ΓE: Re	gistered A	gen)	l signature require	ed when reinstating)		DATE			
12.		OFFIC	ERS AND DIF	ECTOR	S		13.			ADDITIONS/C	HANGES TO OFFI	CERS AN	D DIRECT	ORS	IN 12
TITLE	D				☐ DELETE		1.1 TITLE	:					Chang	e [Addition
NAME HIGGINBOTHAN, FRANK				1.2 N				E							
STREET ADDRESS 1592 JUNO ISLES BLVD				1.3 \$				1.3 STREET ADDRESS							
CITY-ST-ZIP								- \$1-	-ZIP						
TITLE	CPD			☐ DELETE 2.1			2.1 TITLE						Chang	e	Addition
NAME		ns, scott g		2.2			2.2 NAME								
STREET ADDRESS	1010 1110111				2.3 9			ET A	VDDRESS						
City - St - ZIP							2.4 CITY-ST-ZIP								
TITLE	D				☐ DELETE		3.1 TITLE						☐ Chang	,в Т	Addition Addition
NAME	IRWIN, RAMOND			3.2			3.2 NAME								
STREET ADORESS	4	COUNTYLINE	RD				3.3 STAE	ET A	NODRESS						
CITY-ST-ZIP	JUPITER	R FL					3.4. CITY	- ST	-ZIP						
TITLE	SD				DELETE		4.1 TITLE						Chang		Addition
NAME	ELLIOT	r, edward L.	, I II				4. 2 NAN	1E			11191				
STREET ADDRESS				4.3 STAI				ET A	VODRESS 🔓	447 BEAG	pupill ne				_
CITY+ST-ZIP	N PALM	BCH FL					4.4 CITY	-ST-	-ZIP P	447 Beach	BARDONS	$\mathcal{F}I$	-334	110	}
TITLE	D				DELETE		5.1 TITLE	:	T			,	Chang	е [Addition
NAME	AYERS,	J. DONALD					5.2 NAM	E							
STREET ADDRESS	174 BA	YBERRY CIR				1	5.3 STRE	ET A	NODRESS						
CITY - ST - ZIP	JUPITER	R FL					5.4 CITY	- 51-	- ZIP	•					
TITLE	TD				DELETE		6.1 TITLE						Chang	je [Addition
NAME	TALLEY	, DAVID					6.2 NAM	E							
STREET ADDRESS		THOM RD							nnerec .						

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 to payled. Or en an attachment with an address.

6.4 CITY-ST-ZIP

SIGNATURE:

FILED

Mar 03 1997 8:00am

Secretary of State

FEI # 59-1516451 North Palm Boach PRASby FERIAN Church FNC

P8#2 ITem #12

NAME: SCHWARTZ, VARICK

Address: 14240 Paradise Point Rd City: Palm Beach Bardons, Fl 33410

8. Title , VCD

NAME: HOGAN, JOANNA

Address: 4632 JUNIPUR LANE

CITY: PAIM BEACH GARdENS, Fl 33418

Title! D

NAME: TORNEY, MARGARET

Addross: 533 Anchorage DR

City! North Palm Boach, Fl 33408